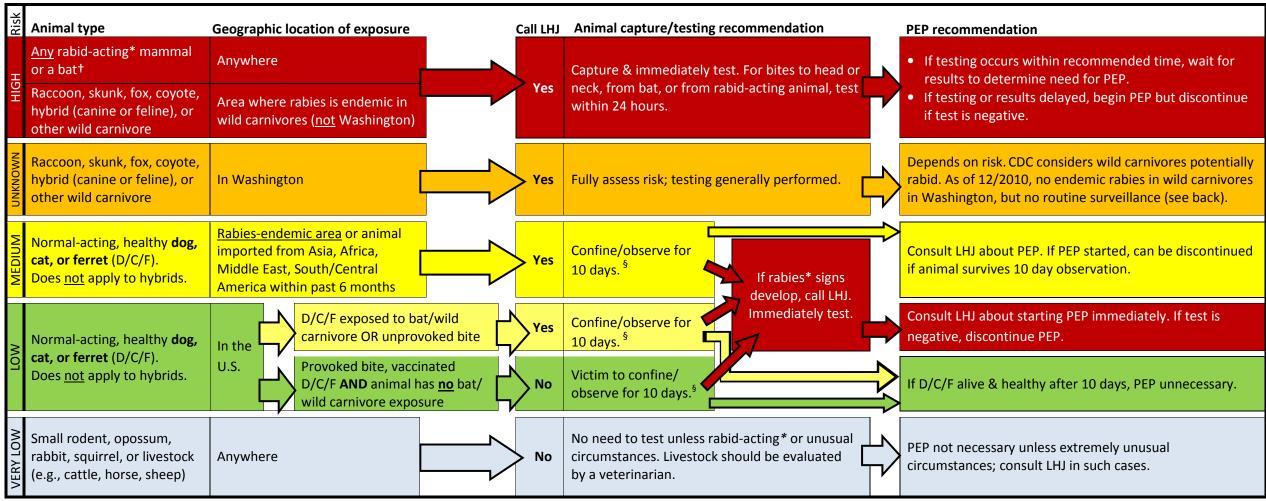
Washington State Guidelines for Human Rabies Prevention

- All suspected human rabies exposures must be <u>immediately</u> reported to the local health jurisdiction (LHJ) (WAC 246-101).
- If giving post-exposure prophylaxis (PEP) to a patient, report exposure to the LHJ.
- Consultations & animal testing is available from the LHJ as needed. If unable to reach LHJ, call Washington State
 Department of Health (DOH) Communicable Disease
 Epidemiology Section (1-877-539-4344 or 206-418-5500).
- Rabies exposures include bites, scratches, fresh wounds, or mucous membranes contaminated with a mammal's saliva or neural tissue. Touching animal fur, blood, urine, or feces is <u>not</u> a rabies exposure. Non-mammals, e.g., birds and reptiles, do not get rabies.
- Exposures to bats deserve special consideration.†
- Rabies risk assessment should consider: (1) Animal species, health and behavior; (2) Geographic location of exposure; (3) Animal vaccination status; (4) Provoked bite (e.g., entering an animal's territory, helping an injured animal, trying to capture, coming between animal and its young, taking animal's food away, acting aggressively toward an animal, petting an unfamiliar animal) vs. unprovoked bite; (5) Likelihood an animal was exposed to another rabid animal (e.g., a pet that is frequently exposed to bats).



^{*} Rabid-acting: A set of neurologic signs (e.g., extreme aggression, excess salivation, unusual vocalizations, behavior change) best determined by a veterinarian.

[†] Bats: May assume exposure when a bat is found in a room with a person who cannot say that exposure did <u>not</u> occur (e.g., unattended infant or child, intoxicated adult, sleeping person). Bat bites may not leave visible marks.

^{\$} Local county policy may differ as to whether observation should be done in home or with animal control. If D/C/F becomes ill or dies during observation, a veterinarian should be consulted to evaluate for rabies.

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Legal reporting requirements in Washington State regulation (WAC 246-101-101 and -301)

- All healthcare providers, healthcare facilities, and veterinarians are required to immediately notify the local health jurisdiction (LHJ) regarding suspected rabies exposures, including:
 - o "Animal bites (when human exposure to rabies is suspected)," and
 - o "Rabies, suspected human exposure (suspected human rabies exposure due to a bite from or other exposure to an animal that is suspected to be rabid)"
- The algorithm is intended to be a guide in determining whether an exposure to rabies should be suspected.

Washington State rabies facts

- Bats are currently the only known reservoir for rabies in Washington State.
 - o Rabies is not endemic in raccoons, skunks, foxes, or other wild carnivores in this state; however no routine animal surveillance is done in Washington.
 - o Rarely, other animals are bitten by bats and may become rabid in Washington State; examples since 1988 include horse, llama, and cat.
 - o Historical animal testing for rabies in Washington State: http://www.doh.wa.gov/notify/other/rabiestested-past.pdf
- Imported animals may increase the risk in Washington State.
 - o Risk differs elsewhere in the United States (e.g., raccoon rabies in the east coast, skunk rabies in central states) and internationally (e.g., dog rabies in Asia, Africa, etc.).

Criteria for assessing risk of rabies exposure

- Consider the following: (1) animal type and health/behavior (see Rabid-acting*); (2) geographic location of exposure; (3) animal vaccination status; (4) circumstances of exposure (provoked vs. unprovoked); (5) likelihood the animal could have been exposed to another rabid animal (outdoor vs. indoor animal; travel/import history of animal; feral/stray vs. pet).
 - o Provoked bites may include: invasion of animal's territory, assisting an injured animal, startling or trying to capture an animal, coming between animal and its young, taking food away from an animal, acting aggressively toward an animal, or attempting to pet an unfamiliar animal.
- If you are unsure, consultations are available from your LHJ. If unable to reach LHJ, call DOH Communicable Disease Epidemiology Section (see below).

References and additional resources

- WASHINGTON STATE
 - LHJ contact information: http://www.doh.wa.gov/notify/other/lhjcontacts.pdf
 - Washington State Department of Health contacts:
 - Human exposures/illness: Communicable Disease Epidemiology Section (CDES), 877-539-4344 or 206-418-5500 (24/7 on-call service)
 - Animal-only exposures: Environmental Health-Zoonotic Disease Program: 360-236-3385 (Mon. Fri., 8 am 4 pm only; if unable to reach, call CDES)
 - Testing (human and animal): Communicable Disease Epidemiology Section (CDES), 877-539-4344 or 206-418-5500 (24/7 on-call service)
- UNITED STATES
 - o Centers for Disease Control and Prevention: http://www.cdc.gov/rabies/
- INTERNATIONAL
 - World Health Organization recommendations: http://www.who.int/wer/2010/wer8532.pdf